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DEC 13 2004

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Klebanov
 Serial No.: 09/270,256
 Filing Date: March 15, 1999
 Confirmation No.: TBD

Examiner: Ryan Yang
 Art Unit: 2672
 Our File No.: 00100.99.0044
 Docket No.: 0100.9900440

Title: **METHOD AND APPARATUS FOR RENDERING AN IMAGE IN A VIDEO GRAPHICS ADAPTER**

Mail Stop AF
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Certificate of Facsimile
 I hereby certify that this paper is being sent via fax to 703-872-9306 addressed to: Attn: Examiner Yang, Mail Stop AF, Comptor for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on this date.

12/13/04 M. Adams
 Date MonaLisa Adams

PRELIMINARY AMENDMENT AND REQUEST FOR CONTINUED EXAMINATION

Dear Sir:

Prior to examination, Applicants respectfully request that the above-identified application be amended as follows:

Amendments to the Claims can be found on page 2 of this document.

Amendments to the Drawings begin on page 6 of this paper and include both one (1) attached replacement sheet and one (1) annotated sheet showing change in red.

Remarks can be found on page 7 of this document.

An **Appendix** including amended drawing figures is attached following page 13 of this paper.

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PAGE 7/21 * RCVD AT 12/13/2004 6:07:58 PM (Eastern Standard Time) * SVR:USPTO-EFXRF-1/2 * DNIS:8729306 * CSD:3126095005 * DURATION (mm:ss):06:00

PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

09/270256

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS			
FOR		NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	15	minus 15 =	* 0
INDEPENDENT CLAIMS	2	minus 2 =	* 0
MULTIPLE DEPENDENT CLAIM PRESENT			<input type="checkbox"/>

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR			PRESENT EXTRA
		Minus	**	=	
Total	* 13	Minus	** 20	=	0
Independent	* 2	Minus	*** 3	=	0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					<input type="checkbox"/>

12-13-04

(Column 1) (Column 2) (Column 3)

AMENDMENT	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR			PRESENT EXTRA
		Minus	**	=	
Total	* 24	Minus	** 20	= 4	
Independent	* 3	Minus	*** 3	=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					<input type="checkbox"/>

7-25-05

(Column 1) (Column 2) (Column 3)

AMENDMENT	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR			PRESENT EXTRA
		Minus	**	=	
Total	* 25	Minus	** 24	= 1	
Independent	* 3	Minus	*** 3	=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					<input type="checkbox"/>

- If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SMALL ENTITY
TYPE OR OTHER THAN
SMALL ENTITY

RATE	FEES	RATE	FEES
BASIC FEE	375.00	OR BASIC FEE	720.00
X\$ 9=		OR X\$18=	
X43=		OR X86=	
+140=		OR +280=	
TOTAL		OR TOTAL	720.

OTHER THAN
SMALL ENTITY OR SMALL ENTITY

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9=		OR X\$18=	
X43=		OR X86=	
+140=		OR +280=	
TOTAL		OR TOTAL	ADDITIONAL FEE

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9=		OR X\$18=	200.00
X43=		OR X86=	
+140=		OR +280=	
TOTAL		OR TOTAL	200.00

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9=		OR X\$18=	50.00
X43=		OR X86=	
+140=		OR +280=	
TOTAL		OR TOTAL	50.00